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DATE:

June 25, 2004

TO:

Examiner Barabar J. Musser

FAX NO.:

703-872-9306

USPTO GPAU 1733

FROM:

Jeffrey S. Abel

RE U.S. App. No.: 10/029,046, filed December 21, 2001

Applicant(s): John W. Kosty, et al.

Atty Dkt No.: 1035-04081

Title:

SEALS FORMED FROM POLYMER LAMINATED METALLIC

CONSTRUCTIONS

NO. OF PAGES (including Cover Sheet): 13

MESSAGE:

Attached please find:

Fee Transmittal (1 pg)

Extension of Time (Three-month) (1 pg)

Response to Final Office Action (9 pgs)

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PTO/SB21 (05-03)
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	Application Number	10/029,046						
TRANSMITTAL	Filing Oate	December 21, 2001						
FORM	First Named Inventor	John W. Kosty, et al.						
(to be used for all correspondence after initial filling)	Art Unit	1733						
	Examiner Name	Barbara J. Musser						
40	Attorney Docket Number	1035-04081						
Total Number of Pages in This Submission 12		1000-04001						
ENCLOSURES (Check ell that apply)								
Certified Copy of Priority	Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Add Terminal Disclaimer Request for Refund CD, Number of CD(s) Remerks Customer No.: 34456	After Allowance communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below):						
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	_	Complete if Known								
FEE TRANSMITTA		Application Number			10/029,	10/029,046				
5 EV 0004		Filing Date		Decemb	December 21, 2001					
for FY 2004		First Named Inventor		or John W.	John W. Kosty					
Effective 10/01/2003. Patent fees are subject to annual ravision.		Examinar Nama				Barbara J. Musser				
Applicant claims small entity status. See 37 CFR 1.27		Art Unit			1733	1733				
TOTAL AMOUNT OF PAYMENT (\$) 950.00		Attorney Docket No.			. 1035-O	1035-04081				
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)								
Check Credit card Money Other None	3. ADDITIONAL FEES									
Deposit Account:	Large Fee	Large Entity Small Entity								
Deposit 50 0400				100 (\$)	Fee D	Description	Fee Paid			
Account Number 50-2469	105		2051		Surcharge - late	filing fee or oath				
Deposit Account TOLER, LARSON & ABEL, LLP		2 50	2052		Surcharge - late pover sheet	ircharge - late provisional filing fee or war sheet				
Name The Director is authorized to: (check all that apply)		3 130	1053	130 f	Non-English spe	-English specification				
Charge fee(s) Indicated below Credit any overpayments	181	2 2,520	1812 2,		-	est for ex parte reexemination				
Charge any additional foo(s) or any underpayment of fee(s)	180	920*	1804		Requesting publ Exeminer action	lication of SIR prior to	<u> </u>			
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to the above-identified deposit account.		1 110	2251		_	i iply within first month				
FEE CALCULATION	125		2252			ply within second month				
1. BASIC FILING FEE Large Entity Small Entity	125	3 950	2253	475	Extension for re	aply within third month	950.00			
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1001 770 2001 385 Utility filling fee	125	5 2,010	2255	1,006	Extension for re	aply within fifth month	├			
1002 340 2002 170 Design liling fee	140	1 330	2401	165	Nation of Appea	oli				
1003 530 2003 265 Plant filing fee	140		2402		_	support of an appeal				
1004 770 2004 385 Relssue filing fee	140	3 290 1 1,510	2403 1451		Request for ora	i nearing ute a public use proceeding				
1005 160 2006 80 Provisional filing fee	145	•	2452		Petition to reviv	•				
SUBTOTAL (1) (\$) 0.00		3 1.330	2453			e - unintentional				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1 1,330	2501		Utility issue fee					
Extra Claims below Fee Paid	150	2 480	2502	240	Design issue fe					
Total Claims 20** = X =	150	3 640	2503		Plant issue fee					
Claims Multiple Dependent	146		1480		Petitions to the					
Large Entity L Small Entity	180		1807		_	under 37 CFR 1.17(q)				
Fee Fee Fee Fee Fee Description	180		1806			nformation Disclosuro Stml patent assignment per				
Code (\$) Code (\$) 1202 18 2202 9 Claims in excess of 20	802		8021		property (umes	number or properties)				
1201 88 2201 43 Independent claims in excess of 3	180		2809	505	(37 CFR 1.129)					
1203 290 2203 145 Multiple dependent claim, if not paid	181	0 770	2810	385	For each addition examined (37 C	onal invention to be CFR 1.129(b))				
1204 88 2204 43 Reissue independent claims over original patent	180	1 770	2801	385	-	ontinued Examination (RCE)				
1205 18 2205 9 ** Relssue claims in excess of 20 and over original patent	180	2 900	1802	900	Request for ex of a design app	cpedited examination dication				
SUBTOTAL (2) (\$) 0.00		Other fee' (specify)								
"or number previously paid, if greater; For Reissues, see above Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 950.00						00				
SUBMITTED BY (Complete (F applicatio))										
Name (Prin/Type) Jeffrey & Abel Registre Signature					79	Telephone 512-327-5515				
Signeture ////// Date G/25/04										

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